DELTA TOWNSHIP ATHLETIC REGISTRATION FORM - Please use one form per person. Feel free to make copies.

PARTICIPANT'S NAME			HOME PHONE	CHII	LD'S DOB	M/F
STRE	EET		WORK PHONE	I	☐ MEDICAL CON (Attach brief expla	
CITY	, ZIP		PERSON'S NAME AT WOR PHONE		·	,
IF YOU WOULD LIKE TO RECEIVE NOTICES OF UPCOMING EVENTS VIA EMAIL, PLEASE PROVIDE YOUR EMAIL ADDRESS:						
	EVENT NAME	REGIS'	TRATION INFORI	MATION		COST
	2005 BASKETBALL - \$28 Deadline: December 17, 2004 Ages 7-10 as of December 1, 2004 Cost after 12/17/04 if availability: \$38	School my child attends:				
	2005 SPRING SOCCER - \$22 Deadline: February 25, 2005 Ages 4-10 as of December 1, 2004 Cost after 2/25/05 if availability: \$32	School my child attends: Yes, I am willing to coach my child's team. If yes, name: 10 on 10 (actually 7x7, 8x8, 10x10, 11x11)				
	2005 BOYS BASEBALL - \$22 Deadline: May 6, 2005 Ages 7-9 as of June 13, 2005 Cost after 5/6/05 if availability: \$32	School my child attends: Yes, I am willing to coach my child's team. If yes, name:				
	2005 GIRLS SOFTBALL - \$22 Deadline: May 6, 2005 Ages 7-11 as of June 13, 2005 Cost after 5/6/05 if availability: \$32	School my child attends: Yes, I am willing to coach my child's team. If yes, name:				
	2005 COED TBALL - \$22 Deadline: May 6, 2005 Ages 5-6 as of June 13, 2005 Cost after 5/6/05 if availability: \$32	School my child attends: Yes, I am willing to coach my child's team. If yes, name:				
Phone: (517) 323-8555 Internet: www.deltami.gov/parks Make checks payable to: Delta Township Mail to: Delta Township Parks and Recreation, 7710 West Saginaw Hwy, Lansing 48917 Applications must be received by the posted deadline, not postmarked by then. No special requests will be honored.						
Programs with this symbol require a blue and white reversible shirt. If your child needs one, please select a size and enclose an additional \$10. XS S M L XL (all sizes are adult) - \$10						
Parent/Guardian or Adult Participant Waiver, Release of Liability & Consent Agreement I understand that the Delta Township Parks and Recreation Department and its program co-sponsors thereof, are in no way responsible for any injury that may be incurred by myself or my child while participating in the program(s) I have registered for and agree to hold the above harmless for injury and damages in return for such participation. TOTAL OFFICE DATE RCVD					OFFICE US	SE ONLY
Parent/Guardian or Adult Participant Signature RECEIPT # SHIRT						
Please Print Name RECEIVED?					I I I Voc	☐ No